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MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM 170-17)

SERIAL NO.

735925

FILING DATE

12-14-00

CLAIMS

	AS FILED		AFTER 1st DEPENDENT		AFTER 2nd DEPENDENT	
	NO.	DEF.	NO.	DEF.	NO.	DEF.
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	1st DEPENDENT		2nd DEPENDENT		3rd DEPENDENT	
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4/17/01